AU6 76 2018

HANCIAL DISCLOSURE STATEMENT Name: Candidates for Candidate for State: U.S. House of Representatives District: U.S. House of Representatives District: U.S. House of Election: NDV 2018 New Officer or Employee Staff Filer Type (if Applicable): Period Covered: January 1, A \$2 Ind has been proving Office:	Page 1 of LEGISLATIVE RESOURCE CENTER 18 AUG 15 PM 1: 16 U.S. HGUS Z OF REPRESENTATIVE CONICE Use Only) A \$200 penalty shall be assessed sgalnet any individual who files more than 30 days late.
PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? Or have asset during the reporting period? b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	he reporting has No X
C. Did you or your spouse have "earned" income (e.g., salaries, honorana, or pension/IRA distributions) of \$200 or more during the reporting period or in the current catendar reporting period? F. Did you have any reportable agreement or errangement with an outside entity during the reporting period or in the current catendar year up through the date of filing?	angemeni wilh an Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes No J. Did you receive compensation of more than \$5,000 from a flability (more than \$10,000) at any point during the reporting period?	3,000 from a Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	OMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	e you excluded Yes No X
EXEMPTION — Have you excluded from this report any other assets, "uncerned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	If three tests for Yes No No

1															78.8				i
-					-	-	-					-	-		פָתי		≥		SC
															ASSET NAME		Assets and/or Income Sources		SCHEDULE A - ASSETS & "UNEARNED INCOME"
															12				75
																Ngge >			Qο
L																51-\$1,000 **			÷
-					ļ <u>.</u>		<u> </u>	<u> </u>				<u> </u>	<u> </u>			51,001-515,000		<u> </u>	Ž
								<u> </u>	ļ		L					\$15,001-\$50,000.			\ <u>≯</u>
 _			_	<u> </u>	 		 	ļ.,	 	-		ļ	<u> </u>	ļ		\$50,001-\$100,000 m	<u>≨</u>	-	2
 -					┼	 -	 -	-		-		-	<u> </u>			\$100,001-\$250,000 m	Value of Asset		
-	-			 	+-	-	-	-	-	 			1	 	1	\$500.001-\$1,000.000 ==	fAs	<u> </u>] =
\vdash	-				 		-		-	\vdash		-	-	\vdash	1	51,000,001-55,000,000	set		ົດ
			-										1	2 1		\$5,000,001-\$25,000,000			9
													!			\$25,600,001-550,000,000 ×			
<u> </u>	<u> </u>				<u> </u>	<u> </u>				<u> · </u>	<u> </u>		Ì			Over 550,000,000] =
<u> </u>	}					-	<u> </u>		}	<u>}</u>				}	}	Spource/OC Asset over \$1,000,000*		—	}
<u> </u>	 	<u> </u>		<u> </u>	<u> </u>	<u> </u>	 	-	├	-	 -		!	┼		MOKE ·		<u> </u>	1
	-	-			┪			1	-				├	-	╂	DIVIDENDS			1
 -	├	-		 	-	├	-	-	╂			-	 -	 -	 -	RENT	¥	 	┤ ┌──
┢	├─-	-	-		100	\vdash	-	 	╫	-	 	┼	!	├-	 	CAPITAL BAINS	Type of Income	┇┞─	Name:
-	╫	 	-	-	-	╁	 	 	-	-	 	 	├-	┼	+-	EXCEPTED/BLIND TRUST	200	BLOCK C	│
-	\vdash	-		-	-		╁	-	-	-	-	-	╁	╁	┪	TAX-DEFERRED	ome	<u> </u>	1 1~
┢	-	-		-	┼	\vdash	 	+	-	-	-	╁╌	+	-	1				ן <i>א</i> ן
							1			1			Ì			Other Type of Income (Specify: a.g., Partennalip income or Fants income)		l	13
┝	-	╢	-	╆╾	┿	┼	-	1	 	+-	+	├-	 	+	┼~	None -		╅	∮ 4⊀
H	\vdash	\vdash		一	╁╌	1	1		<u> </u>			 	1	\top	<u> </u>	\$1-\$200 =			
							Ĺ						ì			\$201-\$1,600 ≥			1 P.
																\$1,001-\$2,500 ~			
Ŀ	ļ	ļ	ļ	<u> </u>	<u> </u>	 	<u> </u>	 	<u> </u>	<u> </u>		 	<u> </u>	↓_	 	\$2.99/\$5.000		<u> </u>	19
<u> </u>	 - -	-	 -	 	\vdash	-	-	+	-	├	-	-	1	┼	╂—-	\$15,001-\$15,000 S S		 	118
-	-	-	 	-	+-	 	-	-	 	+-	-	-	+	+-	1-	2 0001-815.000 C C C C C C C C C C C C C C C C C C		1—	1 12
!	†-	T	 	 	†	\vdash		 	1-	T	†-		T	+	†	\$100,001-\$1,000,000			2 kes
		Γ					L							Î		\$1,000,001-55,000,000 ×	A		
				<u> </u>												Over 15, 100, 000	Amount of Income	<u>.</u> []
-	-	-	-	-	+-	\vdash	+	-	-	+-	1	-	1	+	+-	SpouseOC Income over \$1,600,000" 2	n of	ELOCK D	⋠ 【
1	+-	\vdash	1	-	+	+-	+	†	 	 	 	1	+-	+-	1 —	: Mine :- :- :- :- :- :- :- :- :- :- :- :- :-	a a	ē	┥ ┃
								\Box					1	\perp		\$201-\$1,600	ome]
																\$1,001-\$2,000 <			Page
	1	<u> </u>	<u> </u>	<u> </u>	1	1	1.	-		-	<u> </u>		1	1	1	双侧科(00 < 00 00 00 00 00 00 00 00 00 00 00 00]] [6
-		 	 	-	+-	+-	+	+-	+-	-	₩-	 	-	+-	_	2007-141,000 7 100		 	1 12
	1	\vdash	 -	 	+	+	-	+	+	+	1	-	1	+-	1-	# 1		-	4 1
													Ĺ			Stod oot-est and add			٦
													Ļ	$oxed{\Box}$		\$1.000,001-33,000,000 ×] 5
-	1	 	 	1-		 	1—	 	 	1-	-	 	-	1-	1-	Over 35,000,000		_	4 I I
<u></u>	٠	<u>L</u>	<u> </u>	1	1	1		<u> </u>	!	ł	<u> </u>	L	ì.	_	ــــــــــــــــــــــــــــــــــــــ	SprawarDC Income over \$1,000,000"			≟ }

SCHED

BI COM A	DULE A – ASSETS &
BLOCKB	DULE A - ASSETS & "UNEARNED INCOME"
BLOCK C	Name: Gary
BLOCK D	. George
	Page 3 of 6

						٩į	8,8	III you despe in that in the interval	xod Excel	Excli home Incon intere relire	For a that : busin geogr	For n	For b aff in \$5,00 more	4010 2010	(do n	identi produ exces and (I which		
					Examples			u so chooso,) ne source is ndent child (D s apilional colu s apilional colu o dolalio discu so rafer lo tho	piod invesime	Exclude: Your personal re homes and vacation home recome during the reporting interest in, or income relirement program, includi	For an ownership interest in a potent in a publicity treded, sithet is not publicity treded, situations, in a nature of its business, the nature of its geographic location in Block A.	ental and othe de e comple al property," ar	Hank and other herest-bearing 30, 8st every then \$1,000 b	eli IRAe and () plune) provi ccount that ex	Provide complicie names of stoc (do not uso only scker symbols).	Identify (a) each asse production of income ar exceeding \$1,000 at the and (b) eny other reportat which generated more fracense during the year.	Assets and	:
				ABC Hodge Fund	Simon & Schusler	Maga Cop Stock		il you so choose, you may indicate that an esset o faccame source is that or your spouse (SP) or dependent child (DC), or jointly hald with anyone (JT) in the optional cultura on the far left. For a dollated decusion of Schodulo A requirements place on for to the instruction booklet.	ll you report a privalety-traded fund that is a Excepted involument Fund, please check the 'Ell' box.	Exclude: Your personal realdence, including second homes and vicusion homes (unbus there was ontia licone during the reporting persoly) and say financial interest in, or income derived from, a federal relicontent program, including the Thirth Sevings Pien.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property hold for invostment provide a complete address or description, o.g., must property," and a city and state.	For bank and other cash accounts, total the emount in iff interest-bearing accounts. If the total is one \$5,000, fiel every financial institution where there is more then \$1,000 in Interest-bearing accounts.	For all IRAe and other retrement plans (such as 401(K) plans) provide the value for each asset red in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not uso only scker symbols).	identity (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) <i>enty other reportable asset or source of income which generalised more</i> than \$200 in 'unserned income during the year.	Assets and/or Income Sources	BLOCK A
-+			-	×	<u>.</u>	Ļ	1		73	3555	258	五字		7				
-				<u> </u>	<u>-</u>	╁		None 51-\$1,000	·			<u> </u>		}	25	indicate value of assot at use a valuedon method a spacify the method used. If an asset was acid during only because it genera. "None."		
+			 	!	- -	-		\$1,001-\$15,000						- j	ž a	o vol		
+			-	!-		, -		\$15,001-\$50,000		······································	<u> </u>				20	TO OF		
-				1 :	- -	⊢	<u></u>		·		····			~-	1 858	Section of the sectio	~	
+			-	 	+	┿	×	\$50,001-\$100,000		,	 				36	and of or	aku	m
+				>	+	+		\$100,001-\$250,090 \$250,001-\$500,090	····	 			·		*Column M is for assets held by your spouse or depender child in which you have no hitorest.	indicate value of asset at close of the reporting period, if you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value should be those."	Value of Asset	BLOCK B
+			 	-	+	╁		\$500,001-\$1,000,000							5, 15 5, 15 15 15 15 15 15 15 15 15 15 15 15 15 1	De la contra	Às	×
+		-	 	-	1	╁		51,000,001-55,000,000				. 		_	Ę Ę		set	
+				┼	+	+		\$5,000,001-\$25,000,000			 -		٠	_	STOCK STOCK	eriod B va		
1			 	!	Ť	†		\$25,000,001-\$50,000,00		*			>		ğ	andi		
\top				; -	1	-		Over \$50,000,000			·····					ie, ph		
				-	Í	1		Spouse/DC Asset over	\$1,000,000°				8		호	t you esse		
Ī				Ì	;			NOME		· · · · · · · · · · · · · · · · · · ·		:			E Z	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
-				1	-		×	DIVIDENDS							2 5 E			
丁				1	Ī	T		RENT				· .		7	85		J	
1	-			Ì	1	T		MIERESI						7	None" if the asset gene during the reporting period		Type of Income	100
+			_	1 -	Ť	+		CAPITAL GAINS		·		·····			9 9	the place	약	вгоск с
-		 	 	+	1	1		EXCEPTED/BLIND TR	JST	<u> </u>			··	7	5 3		nco	2
+			 	'	÷	+		TAX-DEFERRED	···						ite.	y. F	me	
				(acama	. To see			Other Type of Income (ipecify; e.g.,	Paznentjip incom	e or Famu Incom	xe)			"None" if the asset generated no income during the reporting period.			
\Box			L	<u> </u>	1	1	`	None			 -					For assignated in Check Tolumn		
_ļ		<u> </u>	<u> </u>	<u> </u>	<u> </u>	1	×	\$1-5200					-					
_		 	 	! _	- -	}-		\$201-\$1,000					=======================================			to is for which you chacked "Tas-Deferred" in Slock C; you may checkilhe "None" column. For all other indicate the category of income by checking the appropriate box below. Dividende, Interest, and gains, even if retirivested, must be disclosed as income for assets held in taxable accounts. "None" if no income was earned or generated. "None" if no income was earned or generated.		
1		-	 	<u> </u>	1	<u>.</u>		\$1,001-\$2,500						c		which s the ever if no		
+		1-	-	1	j×	+		\$2,501-\$5,600					٧ .	E		nyou cate incor		
\dashv		-	-	<u>×</u>	+	+		\$5,001-\$15,000		····			<u> </u>	1		Sory Sory The W		
+		-	-	<u>. </u>	- } .	-		\$15,001-\$50,000 \$50,001-\$100,000		<u> </u>	<u> </u>	<u> </u>	WA IS	urrent Year		of in		
+		ļ	}—	1	-	+	_	\$100,001-\$1,000,000					×	7		Taxe Common di, mas Journal		
\top		-	1	1	Ť	Ť		\$1,000,001-\$5,000,000					*			or ga	À	
		-			-			Over \$5,000,000					×			meral t	Amount of Income	
1				{	ţ	Ι		Space OC income over	\$1,800,000				ğ			n Sio Ing in Ing.	7. Q	BEOCK O
					Ţ].		Mane				<u> </u>				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3	Š
_		ļ		<u></u>	-	1		\$1-\$200		, ,			*			d Inco	COT	
_1		<u> </u>	╙	Ļ.		1	×	\$201-\$1,000								may dete	õ	
-				 -	_ <u>;</u> -:	+		\$1,001-\$2,500				 -		골		box for a		
+		<u> </u>	+-	<u> </u>	<u> </u>	+		\$2,501-\$5,000 \$5,001-\$15,000	·				<u> </u>	Preceding Year		kiha belor steta yeu t		
1		} -	 	 _	<u>}</u>	十	.	\$15,007-\$50,000					3			No.		
\dashv		<u>!</u>	 		+	十	<u> </u>	\$50,001-\$100,000					\$	<u></u>				
Ť		İΤ	T	÷	- -	十		\$100,001-\$1,000,000					2	4		inde.		
1		Ì	1	Ī	1	1		\$1,000,001-85,000,000				_	*					
÷		1	 		i	Ť.	:	Over \$5,000,000	100	-			×			00 M		
- 1		,																

Name:	
Gary	
≈.	
Georg	
e	
Page	The real Property lies
ge 4 of 6	
0	

Column K is for liabilities here solely by your apouse or dependent child.
The second secon
" admindes dwed to you by a spouse or the child, perent, or sibiling of you or your snouge. Report a revolving charge account () e., gredit card) and if the talence at the close of the reporting period
and a secured by automobiles, household jurniture, or appliances; liabilities of a business in which you own an initiast (unless you are personally leads), and
indee was mentione are reduced to report an abundes section by the property mount and before the property and the personal residence. Excitate Any last before the property and the personal residence are reported by the personal residence.
DOTTON New Marshare Marshare Control of the Control
Report liabilities of over \$10,000 owed to any one creditor at any time riginion the reporting being two using source or your dependent oblid. What the highest amount owed during the reporting the reporting the second of the contract of t

ł	7-	7		7	_		
						SP. DC. JT	
	Discover	Band	Stark?	SAS	Ехатрю		
	mer	Bank of America	State of WI, U.S.	berne.	First Bank of Wilmington, DE	Creditor	
	=	=	-	Versous	5/98	Date Liability Incurred MO/YR	
	debt	debt	dsbt/	mortage	Mongege on Kordel Property, Dover, DE	Type of Liability	
-	×	X				\$10,001- \$15,000 >	
						\$15,001- \$50,000	
			_			\$50,0014 \$100,000	
.			X	×	×	\$100,001- \$250,000	٥
	-					\$250,001 <u>+</u> : \$500,000	Amount of Liability
						\$500,001- \$1,000,000	of Liab
	1		1		1.00	\$5,000,000	1
V.						\$5,000,001-	₹
						\$5,000,001- \$25,000,000 == \$25,000,001-	¥
					3 1	\$5,000,001- \$25,000,000	W
			4.			\$5,000,001- \$25,000,000 = \$25,000,001- \$30,000,000	¥

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, irm, partnership, or other business enterprise, nonprofit organization, labor organizations, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

			Position
			Name of Organization

SCHEDULE C - EARNED INCOME

Name: Gary R. Cearge Page 5 of 6

professional services involving a noucially letarulisativ) are covery profitted for members and service static	ji bidili		
Source (include date of receipt for honoraria)	Туре	Am Current har to Filing	Amount Preceding Year
4 ARC Yorks Association Baltimore, MD (July 15)	Нопасыйа	5	
Examples: Saye of Mayland			\$78,000
Onley Board of Education	Spouse Salary	W.	37 UPO
Practice of law		\$ 100,000 }	\$100,000 t
	The state of the s		

SCHE

			Date	tdentify the def continuation or employer.	SCHEDU	
			Parties to Agreement	tdentify the date, parties to , and general terms of any agreement or arrangement that you have with respect to: future employment; constitutation or deferrat of payments by a former or current employer other than the U.S. government; or continuing participation in employer.	SCHEDULE F - AGREEMENTS	
			Terms of Agreement	ve with respect to: future employment; a leave of absence during the period of government service; remment; or continuing participation in an employee welfare or beneft plan maintained by a former	Name: Gary R. George Page 6 of 6	

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business stillation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Board (injury)	
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestete	Accounting Services
Law Office of Gary R. George	Practice of law